SHOWCASING THE DATA

TONIE TROTTER, ANALYST MARCH 2007

This Is Me, Tonie Trotter, Trying to Get Ready for My CHIA/OSHPD 6 City Seminar.



What Is Patient Level Data?

Emergency Department (ED)

Ambulatory Surgery (AS)

Inpatient Hospital Discharge Data (IP)

Public Data Set

Inpatient

- Admit/Discharge Date is converted to length of stay
- Procedure Date is converted to the number of days from the admit date

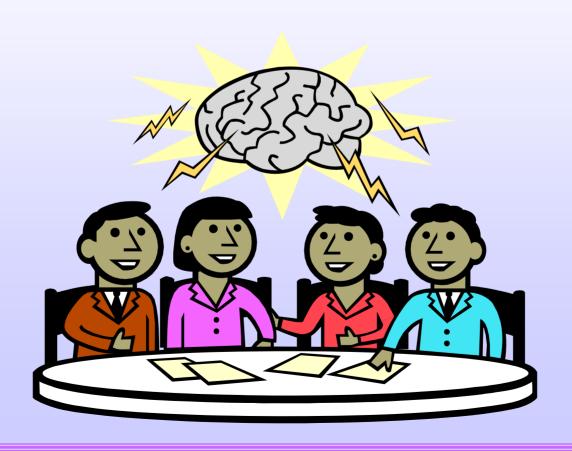
Emergency Department & Ambulatory Surgery

• Service Date is converted to service quarter

All Data Types

- DOB is converted to age categories (0-5, 6-10, etc.)
- SSN is confidential and encrypted

How To Request Patient Level Data? www.oshpd.ca.gov



Welcome to California

OSHPD Home

Boards & Commissions

CA Health & Human Svcs

CPHS

Consumer Information-

Hospital Charges Hospital Fair Pricing **Healthcare Facts** Quality of Care

Services Related To

Community Dev Construction

Healthcare Quality Healthcare Facilities

Healthcare

Rural Healthcare

Seismic Saf

How To -Apply For...

Building Permits

Grants

Loan Insurance

Loan Repayment

Scholarships

Shortage Designation

Find...

Data

Forms & Instructions

Project Status Publications &

Reports

Submit...

Applications Data & Reports

OSHPD Services -

Business <u>Opportunities</u>





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Press Release...



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information, disposition, and expected source of



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Seismic Retrofit Program...



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AB 774 (Chapter 755, Statutes of 2006) requires each licensed general acute care hospital, psychiatric acute hospital, and special hospital to increase public awareness of the availability of charity care, payment discounts, and government-sponsored health insurance; and to standardize its billing and collections This Halo and Ade a measure indentional and about the a

Search

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Featured Links

- ALIRTS
- · Fair Pricing (Charity Care) Policies (1300)
- MIRCal
- Outcome Studies
- Press Releases
- Seismic Safety
- Extension Requests

About OSHPD

- Home
- Organization
- · Director's Office
- Director's Programs
- Laws & Regulations
- Mission & Values
- Public Records Act
- Policy • 2007-08 Health and
- **Human Services Agency Budget**
- 2007-08 OSHPD Budget
- Tell us what you think!
- Contact Us

General Information

- · Acronyms & Glossary
- Links
- Site Map
- FAQs
- Help Tools



OSHPD Home

Boards & Commissions

CA Health & Human Svcs -

CPHS

Consumer Information-

Hospital Charges

Hospital Fair Pricing

Healthcare Facts
Quality of Care-

Seismic Safety

How To -

Apply For...

Building Permits

Grants

Loan Insurance

Loan Repayment

Scholarships

Shortage Designation

Find...

Data

Forms & Instructions

Project Status

Publications &

Reports

Submit...

Applications

Data & Reports

OSHPD Services -

Business Opportunities

Office of Statewide Health Planning and Development

How To Find - Forms & Instructions

The Office offers a variety of services including insuring loans for public and non-profit healthcare facilities; collecting data from California's licensed facilities; assisting in the designation of Health Professional Shortage Areas; and providing loan repayment funds for medical students. This Forms and Instructions page will assist you in finding the needed forms to participate in these and other programs.

Grants and Scholarships

 State Loan Repayment Program (SLRP) Application Process & Forms

Healthcare Facility Construction (Facilities Development)

- Chapter 8000 Quarterly Reporting Requirements
- O ALIRTS User Guide
- Long-Term Care Facilities:
 - O Annual Financial Reporting Forms
 - O Annual Utilization Reporting Forms
 - Accounting and Reporting Manual for LTC Facilities, 2nd Ed.
 - O ALIRTS User Guide
- · Primary Care and Specialty Clinics
 - O Annual Utilization Reporting Forms
 - O ALIRTS User Guide
- Home Health Agencies and Hospices:
 - O Annual Utilization Reporting Forms
 - o ALIRTS User Guide
- Patient Level:
 - O MIRCAL User Registration and Reporting Forms
 - California Inpatient Discharge Data Reporting Manual, 4th Ed.
 - California Emergency Department and Ambulatory Surgery Data Reporting Manual, 1st Ed.
 - O ICD-9-CM Coding Edit Manual, 7th Ed.

Healthcare Facility Data Requests

Patient Level Data Request and Data Use Agreement Form

Healthcare Quality Outcomes Reporting



CA Obesity Prevention Plan



Exaturad Links

About OSHPD

- Home
- Organization
- · Director's Office
- Director's Programs
- Laws & Regulations
- Mission & Values
- Public Records Act
 Policy
- Tell us what you think!
- Contact Us

General Information

- Acronyms & Glossary
- Links
- Site Map
- FAQs
- Help Tools



OSHPD Home

Boards & Commissions

CA Health & Human

Svcs

CPHS

Consumer Information-

Hospital Charges

Hospital Fair Pricing

Healthcare Facts

Quality of Care

Services Related To

Community Dev Construction **Healthcare Quality**

Healthcare Facilities

Healthcare

Professions

Rural Healthcare

Seismic Safety

How To -

Apply For...

Building Darmite

Office of Statewide Health Planning and Development Healthcare Quality & Analysis Division

Find Data - Inpatient Hospital Discharge Data

Every six months, California licensed hospitals are required to submit specific data on every patient discharged from their facility. Reported data includes patient demographic information, such as age, sex, county of residence, and race/ethnicity; diagnostic information; treatment information; disposition; total charges; and expected source of payment. Hospitals report their patient data via the Medical Information Reporting for California System (MIRCal).

Public Set

The Public Set on CD was developed using a masking technique that masks values for certain demographic data elements from unique patient records. The masking of selected demographic data element occurs in a predetermined order. Data are available beginning with the 1999 reporting period. Due to its size, the Public Set is available for purchase on CD-Rom only. To purchase a public dataset(s), col. the Patient Level Data Request and Data Use Agreement Form and the form to the Healthcare Information Resource Center (HIRC) at (324-9242 or phone (916) 322-2814 for more information.

Documentation (pdf) accompanies the dataset and is also provided here for viewing prior to purchase:

> 2005 | 2004 | 2003 | 2002 | 2001 | 2000 | 1999

Case Mix Index

The Case Mix Index (CMI) is a measure of the relative cost or resources needed to treat the mix of patients in each licensed California hospital during the calendar year. An example of how the CMI is used and the method to calculate it is here

Search

- My CA This site

HIRC Featured Links

- CABG Reports
- Fact Book
- Hospital Listing

HIRC Services

- HQAD Home
- Customer Service
- Resource Center (HIRC)
- Healthcare Data
- Healthcare Outcomes Data Products
- By Facility Type
- By Data Type
 - Faaiii'v Listings

ols

- About Help Tools
- File Formats:
 - o CSV | EXE | TXT | PDF | ZIP
- Using Data:
 - Adobe Acrobat
 - CSV's and Excel
 - Downloading Data
 - Excel Text Import

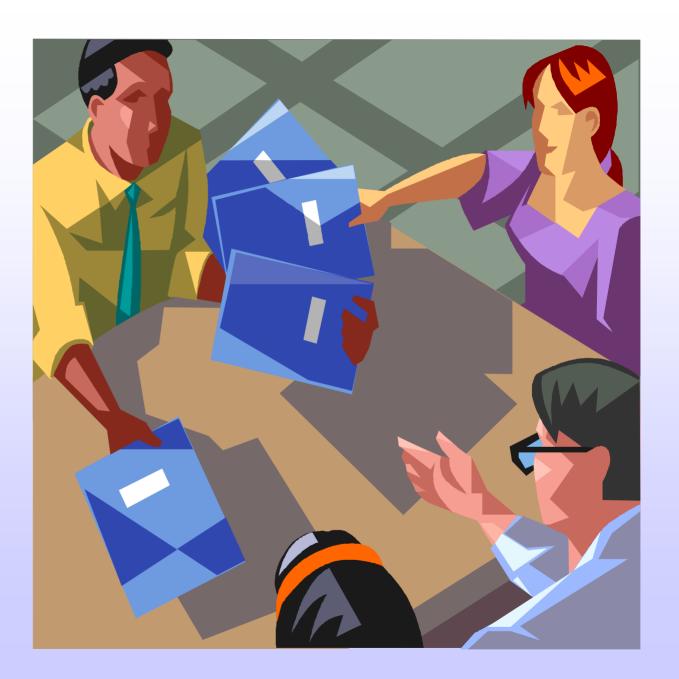
	EL DATA ATA USE AGREEMENT
For Office Use Only	Name:
Request #:	Date Received:
1. PDD Jan-Dec: ASCD	Jan-June: ☐ July-Dec: ☐ EDD Jan-June: ☐ July-Dec: ☐
2. Range of data requested (years):	3. Format: Comma Delimited Text SAS (Version 8 or higher
4. To help us serve you in the future, 1	please indicate the general purposes for which data will be used:
Are you looking at data by:	Market Share Analysis
☐ Statewide	☐ Health Plan/Insurance Coverage
☐ County	Services/Utilization
☐ Zip Code	☐ Quality of Care/Outcomes
☐ Hospital	Other
pursuant to the mandates found in the He	
pursuant to the mandates found in the He section 128675 et seq. It is the policy of the We have, therefore, developed a de-ident In accessing patient level data, I agree to I will not further distribute any patient in the sequence of the	and Development (OSHPD) collects and disseminates patient discharge data ealth Data and Advisory Council Consolidation Act, Health and Safety Code the Office to protect patients' rights of confidentiality as required by that Act. tified patient-level data set. the following: ient-level data or individual patient records, and I will not permit others to do so be the data to learn the identity of any individual patient.
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- Determine what years you need to request.
- **!** Is there a fee?
 - Yes
 - Complimentary for non-profit organizations
- Complete agreement form and fax to: (916) 324-9242
- How is payment made?
- The turnaround time?

TOP 5 DATA REQUESTERS

- Hospitals
- Consultants
- Universities
- Governmental Agencies
- Consumer Groups

Market Share Analysis



Health Plan/Insurance Coverage



Services/Utilization



Quality of Care/Outcomes



Results of Good Quality of Care

Healthy Babies







Longer Life



106 years old







New Products

Emergency Department (ED) Data

❖ Ambulatory Surgery (AS) Data



Welcome to California

OSHPD Home

Boards & Commissions

CA Health & Human Svcs

CPHS

Consumer Information-

Hospital Charges Hospital Fair Pricing **Healthcare Facts** Quality of Care

Services Related To

Community Dev Construction

Healthcare Quality Healthcare Facilities

Healthcare

Rural Healthcare Seismic Safety

How To -Apply For...

Building Permits

Grants

Loan Insurance

Loan Repayment

Scholarships

Shortage Designation

Find... Data

Forms & Instr

Project Status Publications &

Reports

Submit...

Applications Data & Reports

OSHPD Services -

Business <u>Opportunities</u>





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Search

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Featured Links

- ALIRTS
- · Fair Pricing (Charity Care) Policies (1300)
- MIRCal
- Outcome Studies
- Press Releases
- Seismic Safety

Extension Requests

About OSHPD

- Home
- Organization
- · Director's Office
- Director's Programs
- Laws & Regulations
- Mission & Values
- Public Records Act Policy
- 2007-08 Health and **Human Services**
- **Agency Budget** 2007-08 OSHPD Budget
- Tell us what you think!
- Contact Us

General Information

- · Acronyms & Glossary
- Links
- Site Map
- FAQs
- Help Tools



OSHPD Home

Boards & Commissions

CA Health & Human Svcs

CPHS

Consumer Information-

Hospital Charges

Hospital Fair Pricing

Healthcare Facts

Quality of Care

Services Related To -

Community Dev

Construction

Healthcare Quality

Healthcare Facilities

Healthcare Professions

Rural Healthcare

Seismic Safety

How To -

Apply For...

Building Permits

Grants

Loan Insurance

Loan Repayment

<u>Scholarships</u>

Shortage Designation

Find...

Data

Forms & Instructions

Project Status

Publications & Reports

Submit...

Applications

Data & Reports

OSHPD Services -

Business Opportunities

Office of Statewide Health Planning and Development

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The Office provides timely and accurate information on California's healthcare infrastructure by producing and disseminating products including reports, pivot profiles, data files, and other electronic media.

Construction Data

- California Hospital Facility Construction Projects
- · Equipment Anchorage Pre-Approvals
- Seismic Safety Extension Requests

Facility Data

- · Facility Data by Type
- Facility Listings by Type:
 - Hospital
 - Long-Term Care Facility
 - Primary Care & Specialty Clinics
 - Home Health Agencies & Hospices
- Licensed Facility Information System (LFIS) ALIRTS

Financial Data

- · Hospital Annual Financial Data
- Hospital Fair Pricing (Charity Care) Policies
- Hospital Quarterly Financial Data
- Hospital Chargemaster
- . Long-Term Care Facility Annual Financial Data

Utilization Data

- · Home Health Agency and Hospice Utilization Data
- Hospital Annual Utilization Data
- Long-Term Care Facility Annual Utilization Data
- · Primary Care and Specialty Clinic Utilization Data

Patient Level Data

Healthcare Community Data

- Hospital Volume and Utilization Indicators
- Inpatient Hospital Discharge Data

Hospital Community Benefits Plans

Emergency Department and Ambulatory Surgery Patient Data



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Featured Links

- ALIRTS
- Fair Pricing (Charity Care)
 Policies
 No.
- MIRCal
- Outcome Studies
- Press Releases
- <u>Seismic Safety Extension</u>
 Requests

About OSHPD

- Home
- Organization
- · Director's Office
- Director's Programs
- Laws & Regulations
- Mission & Values
- Public Records Act Policy
- 2007-08 Health and Human
 Services Agency Budget
- 2007-08 OSHPD Budget
- . Tell us what you think!

General Information

ontact Us

Acronyms & Glossary

Apply For...

Building Permits

Grants

Loan Insurance

Loan Repayment

Scholarships

Shortage Designation

Find...

Data

Forms & Instructions

Project Status

Publications & Reports

Submit...

Applications

Data & Reports

OSHPD Services -

Business Opportunities

Calendar of Events

Press Releases

Public Meetings

Recruitment



Other Information

Emergency Department (ED and AS Profile Reports (pd) <



Surgery (AS) Profile Reports and MIRCAL and may be accessed

t period begin and end dates. Each report consists of a two-page summary which represents the number and percentage of each data element for a given facility.

New Report Descriptions

- A) Ambulatory Surgery Top Ten Procedure Groups 2005
 - A statewide listing of the top ten principal procedure groups, based on Current Procedural Terminology, Fourth Edition (CPT-4). Includes both hospital based ambulatory surgery and freestanding ambulatory surgery centers.
- B) Emergency Department (ED) Encounters 2005
 - A listing, by hospital, of the number of ED encounters, includes both ED encounters and admissions through the ED.
- C) Emergency Department (ED) Top Ten Cause of Injury 2005
 - A statewide listing of the top ten principal external cause of injury codes. reported by Emergency Departments. This data is only from ED encounters that did not result in a hospital admission.
- D) Emergency Department (ED) Top Ten Diagnoses and Diagnoses Groups 2005
 - A statewide listing of the top ten principal diagnosis codes reported by Emergency Departments, Also included is a statewide listing of the principal diagnoses groups (based on ICD-9-CM codebook chapters). This data is only from ED encounters that did not result in a hospital admission.

- O CSV | EXE | TXT | PDF | ZIP
- Using Data:
 - O Adobe Acrobat
 - CSV's and Excel
 - Downloading Data
 - Excel Text Import Wizard
 - Pivot Profiles

About HIRC

- What's New
- About Us
- · Laws & Regulations
- Contact Us
- Links
- Site Map

OSHPD Home

Boards & Commissions

CA Health & Human Svcs

CPHS

Consumer Information-

Hospital Charges Hospital Fair Pricing

Healthcare Facts

Quality of Care

Services Related To -

Community Dev

Construction

Healthcare Quality

Healthcare Facilities

Healthcare Professions

Rural Healthcare

Seismic Safety

How To -

Apply For...

Building Permits

Grants

Loan Insurance

Loan Repayment

Scholarships

Shortage Designation

Find...

Data

Forms & Instructions

Project Status

Publications & Reports

Submit...

Office of Statewide Health Planning and Development Medical Information Reporting for California (MIRCal)

Outpatient Reports

This page provides access to MIRCal's Ambulatory Surgery (AS) and Emergency Department (ED) Profile Reports. To view a report, first choose a data type, either ED or AS, and then use the pull-down menus to limit your results. Reports that match your query will be displayed after the "List Reports" button is pressed.

Please note, the ED Profile Reports only contain information from Emergency Department Encounters that did not result in a hospital admission. Information on hospital admissions through the ED are included in the Hospital Inpatient Profile Reports.

1. Choose Data Type:

O ED O AS

2. Use the form below to narrow your results.

Facility: - ALL FACILITIES --Period: - ALL PERIODS --

List Reports

Revision Date: December 19, 2006

Administration | Cal-Mortgage Loan Insurance | Facilities Development Healthcare Information | Healthcare Quality & Analysis Workforce & Community Development | Boards & Commissions

Back to the Top

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Search

Mv CA
This site

MIRCal Featured Links

- Log on to MIRCal Now!
- Take Computer-Based Training
- Individual Facility Profile Reports
 - Hospital Inpatient Profile (HIP) Report
 - O ED & AS Profile Report 00000

MIRCal Services

- MIRCal Home
- What's New
- Getting Started
- Calendar of Events
- Resources
- Support
- Training

Reporting Programs

- Inpatient Discharges
- Emergency Department
- Ambulatory Surgery (AS)
- Archives

About MIRCal

- About Us
- Contact Us
- FAQs
- Glossary
- Laws & Regulations

Welcome to California

OSHPD Home

Boards & Commissions

CA Health & Human Svcs

CPHS

Consumer Information-

Hospital Charges

Hospital Fair Pricing **Healthcare Facts**

Quality of Care

Services Related To -

Community Dev

Construction

Healthcare Quality

Healthcare Facilities

Healthcare Professions

Rural Healthcare

Seismic Safety

How To -

Apply For...

Building Permits

Grants

Loan Insurance

Loan Repayment

Scholarships

Shortage Designation

Find...

Data

Forms & Instructions

Project Status

Publications & Reports

Submit...

Applications

Office of Statewide Health Planning and Development Medical Information Reporting for California (MIRCal)

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1. Choose Data Type:

● ED ○ AS

2. Use the form below to narrow your results.

Facility: 108100005 - COMMUNITY MEDICAL CENTER - CLOVIS

Period: 1/1/2005 - 3/31/2005 -- ALL PERIODS --

4/1/2005 - 6/30/2005

7/1/2005 - 9/30/2005

10/1/2005 - 12/31/2005

1/1/2006 - 3/31/2006

4/1/2006 - 6/30/2006

7/1/2006 - 9/30/2006

Revision Date: December 19, 2006

Administration | Cal-Mortgage Loan Insurance | Facilities Development Healthcare Information | Healthcare Quality & Analysis Workforce & Community Development | Boards & Commissions

List Reports

Back to the Top

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Search

Mv CA This site

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- · Log on to MIRCal Now!
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 - ED & AS Profile Report (XIE)

MIRCal Services

- MIRCal Home
- What's New
- Getting Started
- Calendar of Events
- Resources
- Support
- Training

Reporting Programs

- Inpatient Discharges
- Emergency Department (ED)
- Ambulatory Surgery (AS)
- Archives

About MIRCal

- About Us
- Contact Us
- FAQs
- Glossary
- Laws & Regulations

OSHPD Home

Boards & Commissions CA Health & Human Svcs **CPHS**

Consumer Information-

Hospital Charges Hospital Fair Pricing **Healthcare Facts** Quality of Care

Services Related To -

Community Dev Construction **Healthcare Quality Healthcare Facilities Healthcare Professions** Rural Healthcare Seismic Safety

How To -Apply For...

Building Permits Grants Loan Insurance Loan Repayment Scholarships **Shortage Designation**

Find... Data

> Forms & Instructions **Project Status**

Publications & Reports

Submit...

Office of Statewide Health Planning and Development Medical Information Reporting for California (MIRCal)

Outpatient Reports

This page provides access to MIRCal's Ambulatory Surgery (AS) and Emergency Department (ED) Profile Reports. To view a report, first choose a data type, either ED or AS, and then use the pull-down menus to limit your results. Reports that match your query will be displayed after the "List Reports" button is pressed.

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1. Choose Data Type:

● ED ○ AS

2. Use the form below to narrow your results.

Facility: 106100005 - COMMUNITY MEDICAL CENTER - CLOVIS Period: 1/1/2005 - 3/31/2005

List Reports



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Administration | Cal-Mortgage Loan Insurance | Facilities Development Healthcare Information | Healthcare Quality & Analysis Workforce & Community Development | Boards & Commissions

Back to the Top

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Search

My CA • This site

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- Log on to MIRCal Now!
- Take Computer-Based Training
- Individual Facility Profile Reports
 - Hospital Inpatient Profile (HIP) Report
 - O ED & AS Profile Report (XIII)

MIRCal Services

- MIRCal Home
- What's New
- Getting Started
- Calendar of Events
- Resources
- Support
- Training

Reporting Programs

- Inpatient Discharges
- Emergency Department
- Ambulatory Surgery (AS)
- Archives

About MIRCal

- About Us
- Contact Us
- FAQs
- Glossary
- Laws & Regulations



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OSHPD Home

Boards & Commissions

CA Health & Human Svcs

CPHS

Consumer Information-

Hospital Charges

Hospital Fair Pricing

Healthcare Facts

Quality of Care

Services Related To -

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Construction

Healthcare Quality

Healthcare Facilities

Healthcare Professions

Rural Healthcare

Seismic Safety

How To -

Apply For...

Building Permits

Grants

Loan Insurance

Loan Repayment

Office of Statewide Health Planning and Development Medical Information Reporting for California (MIRCal)

Outpatient Reports

This page provides access to MIRCal's Ambulatory Surgery (AS) and Emergency Department (ED) Profile Reports. To view a report, first choose a data type, either ED or AS, and then use the pull-down menus to limit your results. Reports that match your query will be displayed after the "List Reports" button is pressed.

Please note, the ED Profile Reports only contain information from Emergency Department Encounters that did not result in a hospital admission. Information on hospital admissions through the ED are included in the Hospital Inpatient Profile Reports.

1. Choose Data Type:

2. Use the form below to narrow your results.

Facility: 108100005 - COMMUNITY MEDICAL CENTER - CLOVIS

Period: 1/1/2005 - 3/31/2005

List Reports

3. View Your Results:

1/1/2005 - 3/31/2005COMMUNITY MEDICAL CENTER - CLOVIS [Fresno] [106100005]

Revision Date: December 19, 2006

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 - Hospital Inpatient
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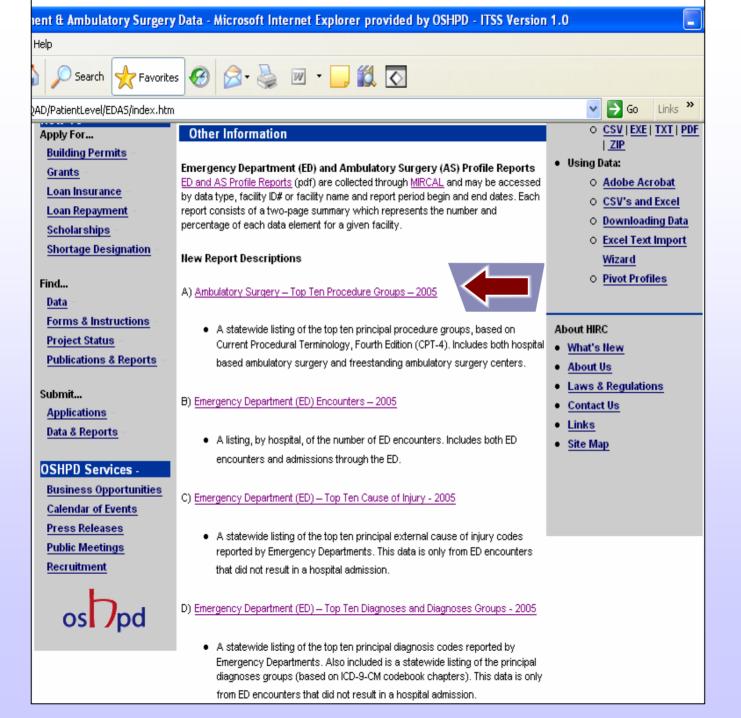
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- What's New
- Getting Started
- Calendar of Events
- Resources
- Support
- Training

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- Inpatient Discharges
- Emergency Department

ere.

	EMERGENCY DEPARTMENT PROFILE REPORT							FILE RE	PORT								
Report Period	: 01/01/2005 - 03/31/2005																
Facility Name		: COMM	UNITY	MEDIC	CAL CENTE	R - CLO	/IS										
Facility Number		: 10000	5			21. 020110											
Data Type		: Emerg	ency De	partme	ent												
Submission Date	е	: 05/12/2															
Report Date		: 12/18/	2006										ort Period	: 01/01/2005 - 03/31/2005			
		EX							ZIP	CODE			ility Name	: COMMUNITY MEDICAL CENTER - CLOVIS			
													lity Number	•			
Male		М	2,248		40.78 %		,	/alid	5	,456	98.98	%	в Туре				
Female		F	3,264		59.22 %		- 1	Non CA		32	0.58	%	mission Date	: 05/12/2005			
Unknown		U	0		0.00 %			Jnknown		14	0.25	%	ort Status	: 12/18/2006			
Blank/Invalid			0		0.00 %		- 1	Blank/Invalid		10	0.18	%		DISPOSITION OF PATIENT			
Total			5,512		100.00 %			Total	5	,512	100.00	%		Description		# of	_
													echarged to home or e	self care (routine discharge)	Code 01	Encounters 5,430	rs Perce
						RAC	-							to a short term general hospital for inpatient care	02	54	(
						KAC	-							to skilled nursing facility (SNF) with Medicare certification	03	0	0
						Mester								to an intermediate care facility (ICF)	04	0	0
		Americ	an		Black or	Native Hawaiia	n							to a non-Medicare PPS childrens hospital or non-Medicare PPS cancer hospital for inpatient care		0	0
		Indian Alask		sian	African	or Other	White	Other Race	Unknown	Blank / Invalid	Total	Percent		to home under care of organized home health service organization rice or discontinued care	06 07	0	(
		Nativ			American	Pacific Islander				invalia				to home under care of a Home Intravenous (IV) provider	08	0	
ETUNICITY	0	(D4)		200	(D2)			(DO)	(00)				pired		20	9	
ETHNICITY	Cod			R2)	(R3)	(R4)	(R5)	(R9)	(99)		4 405		scharged home with he		43	0	
lispanic or Latino) E1	0		0	0	0	0	1,435	0	0	1,435	26.03 %		to a federal health care facility I facility with hospice care	50 51	0	
lon-Hispanic or lon-Latino	E2	64	1	96	163	0	3,608	0	0	0	4,031	73.13 %		tractify with nospice care to a hospital-based Medicare approved swing bed	61	0	
													oonen gear transcriet ea e	to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part unit of a hospital	62	0	
Jnknown	99	-		0	0	0	0	0	46	0	46	0.83 %	scharged/transferred to a Medicare certified long term care hospital (LTCH)			0	
Blank/Invalid		0		0	0	0	0	0	0	0	0	0.00 %	scharged/transferred to a nursing facility certified under Medicaid (Medi-Cal), but not certified under Medicare		64	0	
Total		64	1	96	163	0	3,608	1,435	46	0	5,512	100.00 %	scharged/transferred to	to a psychiatric hospital or psychiatric distinct part unit of a hospital	65	6	9
		1.16 %	6 3.5	56 %	2.96 %	0.00 %	65.46 %	26.03 %	0.83 %	0.00 %	100.00 %		ner valid/Blank		00	13 0	0
													Cardo Escario	Total		5,512	100
	DILLOID A	DIAGNOSI						OTUE	R DIAGNOS	ie							
/alid	RINGPAL	5,512	5	100.0	0 %		Valid	OTHE	4,365		100.00 %						
Invalid/Default		0			0 %		Invalid/Defau	ılt	0		0.00 %			EXPECTED SOURCE OF PAYMENT			
Blank		0			0 %		Total		4,365		100.00 %					# of	
Total		5,512		100.0			Avg / Rec		0.79					Description	Code	Encounters	Percer
Total		0,012		100.0	0 70	_							Pay		09	597	10
	RINCIPAL	PROCEDUR	RE					OTHER	PROCEDUR				er Non-federal program		11	37	0
Valid		5,510		99.9			Valid		16,842	2	100.00 %		erred Provider Organiz	zation (PPO)	12	1,568	28
nvalid/Default		0			0 %		Invalid/Defau	lt	0		0.00 %		it of Service (POS)		13	0	0
Blank		2			4 %		Total		16,842	2	100.00 %		usive Provider Organiz		14	0	(
Total		5,512		100.0	0 %		Avg/Rec		3.06					nization (HMO) Medicare Risk	16	0	(
						-							mobile Medical Cross/Blue Shield		AM BL	862	15
	PRINCIPA	AL E-CODE						OTHE	R E-CODES	3					CH	61	10
Valid		1,701		30.86			Valid		1,773		100.00 %		mpus (TRICARE) nmercial Insurance Company		CI	38	(
nvalid/Default		0		0.00			Invalid/Defau	lt	0		0.00 %		bility	прану	DS	0	(
Not Reported		3,811		69.14		_	Total		1,773		100.00 %		Ith Maintenance Organ	nization	НМ	20	
Total		5,512		100.00	0 %		Avg/Rec		0.32				licare Part A		MA	391	7
						_							licare Part B		MB	238	
/alid	s	SN 5,025		91.16	8 %								licaid (Medi-Cal)		MC	1,450	26
and rvalid		0		0.00									er Federal program		OF	0	(
		487											V		TV	0	(
Inknown				8.84									rans Affairs Plan		VA	0	
		0		0.00									kers' Compensation He	lealth Claim	WC	148	
		5,512		100.00	7 %								ər		00	102	
													lid/Blank			0	(
Blank Total						D											
	nay not add	up to 100 d	ie to roun	nding		Page 1 of	2							Total		5,512	10

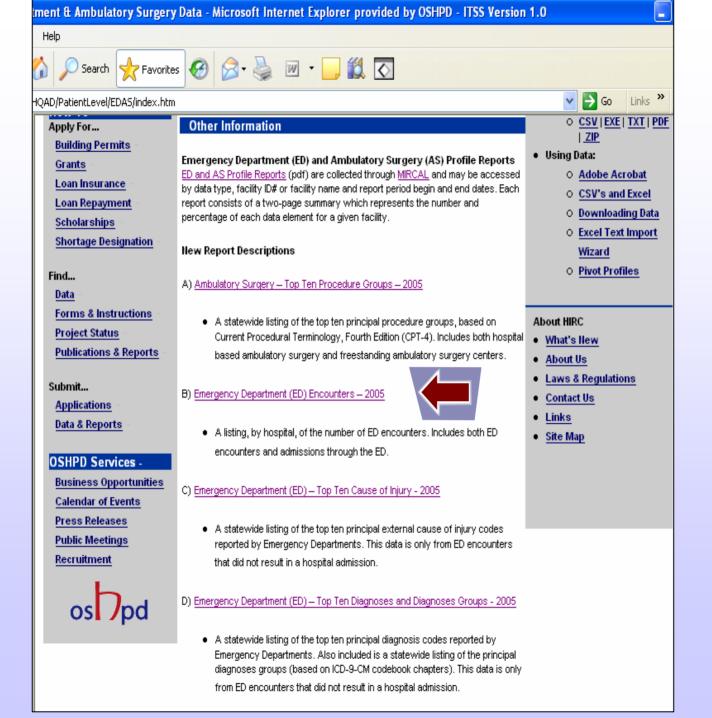


2005 Ambulatory Surgery Data Top 10 Principal Procedure Groups > All Locations <

Principal Procedure Group Desc	# of Encounters	Percentage
Surgery - Digestive System	974,620	34.92 %
Surgery - Musculoskeletal System	379,704	13.60 %
Surgery - Eye and Ocular System	324,121	11.61 %
Surgery - Nervous System	266,522	9.55 %
Surgery - Integumentary System	183,642	6.58 %
Surgery - Cardiovascular System	106,987	3.83 %
Surgery - Female Genital System	94,894	3.40 %
Pathology and Laboratory	73,617	2.64 %
Surgery - Urinary System	67,708	2.43 %
Surgery - Respiratory System	56,763	2.03 %
Percentage of total AS encounters, all locations:		90.59 %

Total 2005 Ambulatory Surgery Encounters By Location

Location Description	# of Encounters
Freestanding (Surgical Clinic)	1,052,398
Hospital-based	1,738,755
Total AS encounters	2,791,153



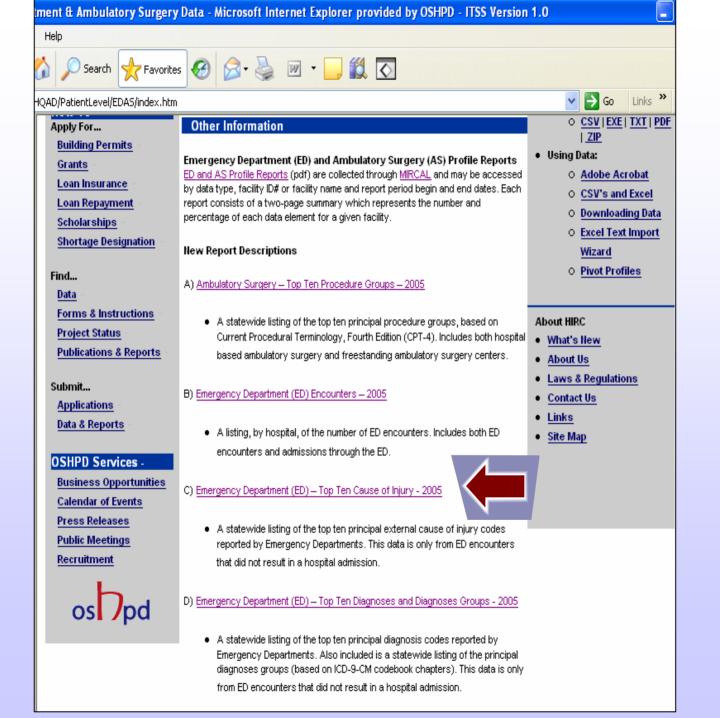
<u>Pa</u>	rtial Display fron	n Dow	<u>nload</u>	# of ED Encounters	# of ED Encounters that	
				that did not	resulted in	Total
				result in an admission	an admission	Reported # of ED
OSHPD ID	Facility Name (337 facilities)	County Name	EMS Level	at same hospital	at same hospital	Encounters for 2005
	radinty ramo (our radinatos)	rtamo	<u> </u>		Побраща	
010735	ALAMEDA HOSPITAL	Alameda	Emergency - Basic	14,473	2,298	16,771
040802	BIGGS GRIDLEY MEMORIAL HOSPITAL	Butte	Emergency - Standby	5,892	419	6,311
100822	UNIVERSITY MEDICAL CENTER	Fresno	Emergency - Comprehensive	39,226	8,699	47,925
580996	RIDEOUT MEMORIAL HOSPITAL	Yuba	Emergency - Basic	40,198	4,585	44,783
	Totals (337 facilities)			8,556,699	1,627,818	10,184,517

Licensed EMS Levels are:

Standby - emergency medical care in a hospital where an EMS physician is at minimum, on-call. (See Title 22, Div. 5, Secs. 70651-70657, Calif. Code of Regulations)

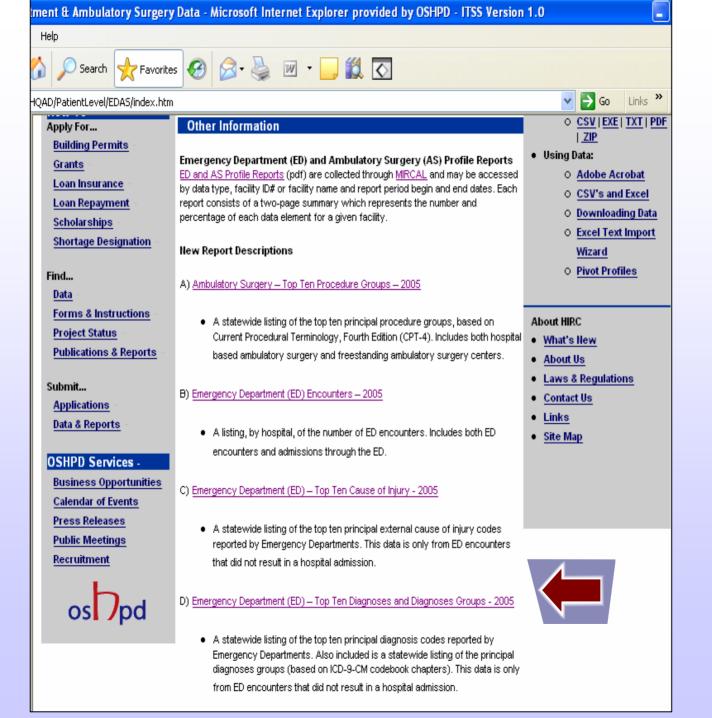
Basic - emergency medical care in a hospital where an EMS physician is on staff 24 hours a day, year-around. (See Title 22, Div. 5, Secs. 70413-70419)

Comprehensive - emergency medical care in a hospital where an EMS physician is on staff 24 hours a day, year-around. Other physician specialties required for this level, 24 hours a day year-around, includes but is not limited to thoracic surgeon, neurosurgeon, orthopedic surgeon, and pediatrician. The hospital must also provide Burn, Acute Dialysis, and cardiovascular surgery services. (See Title 22, Div. 5, Secs. 70453-70459)



2005 Emergency Department Data Top 10 Causes of Injury (Principal E-Codes)

Principal E-Code	Description	# of Encounters	Percentage
E885.9	Fall on the same level from slipping, tripping or stumbling	172,785	8.46 %
E927.	Overexertion and strenuous movements	167,127	8.18 %
E888.9	Unspecified fall	125,970	6.17 %
E917.9	Accidental striking against object	118,367	5.80 %
E920.8	Accidental injury by other specified cutting and piercing instruments or objects	96,010	4.70 %
E928.9	Unspecified accident	90,240	4.42 %
E812.0	Motor vehicle collision (traffic accident), with injured driver	88,790	4.35 %
E917.0	Striking against or struck accidentally by objects or persons in sports, without subsequent fall	54,292	2.66 %
E812.1	Motor vehicle collision (traffic accident), with injured passenger	45,873	2.25 %
E960.0	Unarmed fight or brawl	45,623	2.23 %
	Percentage of all ED encounters (not resulting in an admission)		49.22 %



2005 Emergency Department Data Top 10 Principal Diagnosis Codes

Principal Diagnosis Code	Principal Diagnosis Full Description	# of Encounters	Percentage
465.9	Acute upper respiratory infections of unspecified site	209,857	2.45 %
789.00	Abdominal pain, unspecified site	196,835	2.30 %
799.9	Other unknown and unspecified cause of morbidity or mortality	190,478	2.23 %
382.9	Unspecified otitis media	161,458	1.89 %
784.0	Headache	140,780	1.65 %
599.0	Urinary tract infection, site not specified	136,885	1.60 %
786.50	Unspecified chest pain	135,278	1.58 %
780.6	Fever	129,637	1.52 %
462.	Acute pharyngitis	123,524	1.44 %
558.9	Other and unspecified noninfectious gastroenteritis and colitis	113,127	1.32 %
	Percentage of total ED encounters (not resulting in an admission)		17.97 %

Note: Some hospitals were unable to report diagnosis codes and had all encounters defaulted to code 799.9

rgency Department Data ncipal Diagnosis Groups

	# of Encounters	Percentage
	2,084,692	24.36 %
	1,911,363	22.34 %
	941,001	11.00 %
ective Tissue	487,927	5.70 %
ans	457,426	5.35 %
	441,906	5.16 %
	418,082	4.89 %
	368,340	4.30 %
	309,818	3.62 %
	211,977	2.48 %
(not resulting in an admission)	89.20 %	

Percentage of total ED encounters (not resulting in an admission)

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hirc@oshpd.ca.gov

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QUESTIONS



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Healthcare Information Resource Center

(916) 322-2814

or

hirc@oshpd.ca.gov







